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FORM 3 For An Authorized Committee والزاعة والمحادث الماركات NAME OF TYPE OR PRINT ▼ Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. Al Franken for Senate 2014 P.O. Box 583144 ADDRESS (number and street) Check if different than previously 55458 Minneapolis reported. (ACĆ) FEC IDENTIFICATION NUMBER ▼ CITY STATE ZIP CODE STATE ▼ DISTRICT C00480384 3. IS THIS NEW **AMENDED** MN OR REPORT (N) (A) 4. TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: Primary (12P) General (12G) Runoff (12R) April 15 Quarterly Report (Q1) Convention (12C) Special (12S) July 15 Quarterly Report (Q2) in the October 15 Quarterly Report (Q3) Election on State of January 31 Year-End Report (YE) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Termination Report (TER) in the Election on State of 09 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Thomas Borman 2013 Thomas Borman Date Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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